

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar number, and address</i> ):      TELEPHONE NO.: _____ FAX NO. ( <i>Optional</i> ): _____ E-MAIL ADDRESS ( <i>Optional</i> ): _____ ATTORNEY FOR ( <i>Name</i> ): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____</b> STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITION OF ( <i>Name</i> ): _____	
<b>ORDER FOR CHANGE OF GENDER AND ISSUANCE OF NEW BIRTH CERTIFICATE</b>	CASE NUMBER: _____

1. The petition of (*name*): \_\_\_\_\_ for issuance of a new birth certificate  
reflecting a change of gender came on regularly for hearing on (*date*): \_\_\_\_\_

#### THE COURT FINDS

2. a. ☐ No objections to the proposed change of gender were made.  
 b. ☐ Objections to the proposed change of gender were made by (*name*): \_\_\_\_\_  
 c. It appears to the satisfaction of the court that all the allegations in the petition are true and sufficient and that the petition should be granted.  
 d. ☐ Other findings (*if any*): \_\_\_\_\_

#### THE COURT ORDERS

3. The gender of the petitioner has been changed  
 a. ☐ from male to female.  
 b. ☐ from female to male.

#### THE COURT FURTHER ORDERS

4. A new birth certificate reflecting the change of gender described in item 3 shall be issued.  
 5. A certified copy of this order shall be filed within 30 days with the Secretary of State and the State Registrar. When the State Registrar receives a certified copy of this order and payment of the applicable fees, the State Registrar shall establish for the petitioner a new birth certificate reflecting the gender of the petitioner as it has been altered.

Date: \_\_\_\_\_



\_\_\_\_\_  
JUDICIAL OFFICER